

Riverside View Care Home Service

60 Clovis Duveau Drive
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Telephone: 01382 561 667

Type of inspection:
Unannounced

Completed on:
10 December 2025

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300759

About the service

Riverside View is a residential care home, which is owned and run by HC-One Limited. It is located in the west of Dundee, and there are good transportation links to the city of Dundee.

Riverside View is a purpose-built care home and is registered to provide care for up to 60 people, aged 55 and over. The ground floor, named the 'Bluebell', provides care and support for up to 30 people. There are a further two units upstairs; 'Primrose' and 'Daisy' providing care and support to people living with Dementia. These units have 16 and 14 beds, respectively. The bedrooms are all single occupancy and have ensuite toilet facilities. The upper floor is accessed via a lift, with good wheelchair access to all areas. This service has access to a large, secure garden with different areas provided with patio and seating areas.

About the inspection

This was an unannounced inspection which took place on 10 December 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

This inspection focussed on improvements required from the inspection completed on 27 August 2025 and upheld complaint completed on 6 October 2025. We have detailed the progress in these areas under the following section of this report:

'What the service has done to meet any requirements we made at or since the last inspection'.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. This report should be read in conjunction with the previous report dated 27 August 2025.

In making our evaluations of the service we:

- due to a flu outbreak in the home we did not speak with any people and no relatives were present during the inspection
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Improvements to medication record keeping had been actioned.
- Improvements to falls management and staff training in relation to this had been actioned.
- We observed people being treated with kindness and respect.
- Staff spoken with said they felt well supported, confident and competent in their roles.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 17 September 2025, the provider must ensure that service users are safe from harm by administering medication safely and effectively. To do this, the provider must, at a minimum:

- a) ensure that people receive their time critical medications, at the prescribed time
- b) ensure that medication administration records are completed accurately.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me.' (HSCS 1.19)

This requirement was made on 27 August 2025.

Action taken on previous requirement

During the inspection we sampled medication records for people who live in Riverside View. People who had specific times indicated for their medications to be administered were being consistently given their medication at those times. Recording of the specific times medication had been given assured us that people living in Riverside View had received their medication as prescribed. We were confident that sufficient improvement had been made with time critical medication administration to support people's health, safety and wellbeing.

Met - within timescales

Requirement 2

By 3 December 2025, the provider must make proper provision for the health, welfare and safety of people using the service. In particular, the provider must:

- a) demonstrate effective fall prevention and fall management procedures, including consistent and accurate risk assessment and care planning
- b) demonstrate staff awareness of fall prevention procedures and their responsibility to work in accordance with best practice
- c) demonstrate effective use of fall data to improve the safety and reduce the risk of falls
- d) demonstrate robust and transparent investigation in response to accidents, incidents and unexplained injury

e) demonstrate effective communication with individual's representatives as part of a robust and transparent investigation.

To be completed by: 03 December 2025.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland(Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This requirement was made on 6 October 2025.

Action taken on previous requirement

Falls have reduced and we could see that there has been a lot of work gone into managing falls risks across the care home through monitoring, effective care planning and post falls analysis.

Staff had recently completed falls training relevant to their roles and demonstrated an understanding of falls management in line with best practice.

Work had been completed in relation to management of falls and appropriate actions taken after a fall occurred. Individual fall analysis was carried out for people who presented as a high risk of falling and the information was then used to inform care planning and identify measures to manage and reduce risks for these individuals.

Communication between staff and management was regular and outcomes were identified and actions were taken to prevent the risk of falls for people.

The management team had an oversight of accidents and incidents and an analysis was undertaken on a monthly basis and considered the specifics of falls including frequency, injuries and location within the care home.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to promote activity and independence for people living in the service, the provider should have appropriate signage around the home. The use of the King's Fund Environmental Assessment Tool and involving people/their representative in designing the environment is recommended to help ensure that best practice and people's needs and wishes are taken into account.

Inspection report

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I can independently access the parts of the premises I use, and the environment has been designed to promote this.' (HSCS 5.11)

This area for improvement was made on 27 August 2025.

Action taken since then

The manager had carried out a comprehensive audit of the environment, specifically the upper floor. Plans are in place to replace signage and in consultation with people using the service redecoration of corridors and sitting rooms, along with replacement flooring in corridor areas will be undertaken.

We will review progress with this at the next inspection.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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